



Department of Medicaid

John R. Kasich, Governor

Barbara R. Sears, Director

Medicaid Transmittal Letter (MTL) No. 3336-16-08

DATE: December 26, 2016

TO: Advanced Practice Registered Nurses
Chief Executive Officers, Managed Care Plans
Other Interested Parties

FROM: Barbara R. Sears, Medicaid Director

SUBJECT: Consolidation and Relocation of Medicaid Rules Concerning Advanced Practice Registered Nurse Services

Seven existing rules concerning advanced practice registered nurse (APRN) services, set forth in located in Chapter 5160-8 of the Ohio Administrative Code, have been revised. Relevant provisions of two of these seven rules have been combined into a single new rule located in Chapter 5160-4 of the Ohio Administrative Code. The remaining five rules have been rescinded.

New rule 5160-4-04, "Advanced practice registered nurse (APRN) services," sets forth coverage and payment policies for services provided by an APRN, a term that encompasses a certified registered nurse anesthetist (CRNA), clinical nurse specialist (CNS), certified nurse-midwife (CNM), and certified nurse practitioner (CNP). This rule replaces rules 5160-8-22 and 5160-8-23.

Rule 5160-8-20, "Advanced practice nurses," sets forth definitions of various types of ambulatory health care clinics and advanced practice nurses. This rule has been rescinded.

Rule 5160-8-21, "Advanced practice nurses; eligible Ohio medicaid providers," sets forth the provision that certified nurse practitioners, clinical nurse specialists, and certified nurse midwives can enroll as independent providers (and therefore can submit claims to Medicaid directly) or enroll as a professional medical group. This rule has been rescinded.

Rule 5160-8-22, "Advanced practice nurses: practice arrangements and reimbursement," identifies various practice and employment arrangements and payment provisions applicable to APRNs under the Medicaid program. This rule has been rescinded; some of its provisions have been incorporated into new rule 5160-4-04.

Rule 5160-8-23, "Advanced practice nurses: coverage and limitations," identifies the scope of coverage for APRNs in the Medicaid program. This rule has been rescinded; some of its provisions have been incorporated into new rule 5160-4-04.

Rule 5160-8-24, "Eligible providers of certified registered nurse anesthetist (CRNA) services," sets forth the provision that CRNAs can enroll as independent providers and submit claims directly to Medicaid or can enroll as a member of a professional medical group. This rule has been rescinded.

Rule 5160-8-25, "Coverage, limitations, and reimbursement of anesthesia services provided by certified registered nurse anesthetists (CRNAs)," identifies various practice arrangements and sets forth coverage, payment, and claim-submission provisions for CRNAs. This rule has been rescinded.

Rule 5160-8-27, "Advanced practice nurses: modifiers," delineates the two-character procedure code modifiers used in claims to denote the type of APRN who provided the service. This rule has been rescinded.

These changes take effect for dates of service beginning January 1, 2017.

The text of the new rule looks considerably different.

- The term *advanced practice nurse (APN)* has been updated to *advanced practice registered nurse (APRN)*.
- Unnecessary references, duplicative provisions, and references to obsolete rules have been removed.
- Lengthy specifications of requirements and criteria for APRNs have been replaced by a reference to another chapter of the Ohio Administrative Code pertaining to the Ohio Board of Nursing and by a statement that payment for an APRN service may be made only if the service is within the scope of practice of the particular APRN who provided it.
- A provision has been removed that required documentation beyond a countersignature alone for direct services rendered to individual hospital patients by APRNs employed by or under contract with the hospital.
- Claim-submission instructions have been removed. This information is available in formats other than administrative rule.

Despite the transformed appearance of the new rule, there are only two substantive policy changes.

- Coverage has been simplified. Unless a specific exception is noted, other Medicaid rules that pertain to services performed by a physician now will apply also to APRNs.
- The list of non-covered services has been removed. Instead, a set of conditions is given under which payment for a covered APRN service may be made.

Note: An APRN may now receive payment for serving as assistant-at-surgery. On the claim, modifier AS alone must be appended to the procedure code, and the APRN must be designated (by NPI) as the rendering provider.

Additional Information

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM web page, <http://www.medicaid.ohio.gov>.

Questions pertaining to this letter should be directed to the Ohio Department of Medicaid:

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